		UTATION OF			1. THIS CONTRACT IS					RATING			PAGE OF	PAGES		
2. CONTRACT NUMBER 3. SOLICITATION N				ORDER UNDER DPAS (15 CFR 700)  ICITATION NUMBER  S 5 9 - 0 9 - R - 0 0 0 0 2							1 2					
			SOLICITATION NUMBER								EQUISITION/F	PURCHASE NU	MBER			
					10000 00 10	00002			ALED BID	. ,	03/05/20	09				
7. ISSUED I	BY		CODE M-	-63		8.	ADDRES		R TO (If other		<u> </u>					
11 6	Don	artmont o							(		,					
			f Transporta Svcs / M-63	acton												
		nth Stree														
Room			-,			ļ										
		on DC 205	90													
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NOTE: In se	ealed b	id solicitations "offer	r" and "offeror" mean "bk	I" and "bidde	er".										*****	
-						SOLIC	ITATION				· · · · · · · · · · · · · · · · · · ·					
9. Sealed of	ffers in	original and	conies fi	ar fumishina	the supplies or services in				t the place or	annifind in Ita	n 9 or if band comin	4 1444				
deposito		-	oopios is	a romaning	are supplies of services in	ii iiie ociiedale	WIII DO TO	ceiveu a			O mm		0	14/17/20	200	
	-								until	(H	lour)	ıl time _		(Date)	109	
CAUTIO	N: LA	TE Submissions, Mod A. NAME	ifications, and Withdrawal	: See Section	on L, Provision No. 52.21	4-7 or 52.215-										
10. I						AREA CO		NUMB	Janes I and				AIL ADDRESS			
CA			da J. Chinn			20		366-496			^''	Loni.c	hinnedot	hinn@dot.gov		
			da o. onimi		V0/40-2			L			1			••••••		
(X) S	SEC.	DESCRIPTION				11. TABLE		T	Lamon						Interior	
						PAGE(S)	(X)	SEC.	DESCRI						PAGE(S)	
P/		THE SCHEDULE		· ·		1		PARTI	- CONTRAC							
	Α	SOLICITATION/CO				ļ		<u> </u>	<del>'</del>	ACT CLAUSI						
	В		RVICES AND PRICES/CO					PARTI	ART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACH.							
1	С		ECS./WORK STATEMEN			<del> </del>		J								
(4.5)	D	PACKAGING AND				<del> </del>	-	PART	ART IV - REPRESENTATIONS AND INSTRUCTIONS						- <sub>1</sub>	
	E	INSPECTION AND				<del> </del>	K REPRESENTATIONS, CERTIFICATIONS AND									
	F	DELIVERIES OR P				<b></b>	OTHER STATEMENTS OF OFFERORS							_		
100	G	CONTRACT ADMIN	··			ļ										
ال انتا	Н	SPECIAL CONTRA	CT REQUIREMENTS				1 -	M		TION FACTO	ORS FOR AWARD					
NOTE: Item	12 dos	e not apply if the sol	icitation includes the pro-	delene et 63		Must be fully		tea by e	offeror)							
			dersigned agrees, if this of			_ calendar da		andar da	us unlana a d	lifforont posic						
			pipt of offers specified above							•						
			specified in the schedule.		,	,				, -						
13. DISCOUNT FOR PROMPT PAYMENT 10 CALENDAR DAYS (%)			AR DAYS (%)	20 CALENDAR DAYS (%			6) 30 CALENDAR DAYS			(%) CALENDAR DAYS (%)			)			
(See Se	ection I,	Clause No. 52.232.8	)													
14. ACKNOV	VLEDG	EMENT OF AMEND	MENTS	AMENDMENT NO.		10.			ATE	AMENDME		T NO.		D	ATE	
(The offeror acknowledges receipt of						1										
		o the SOLICITATION cuments numbered ar														
15A. NAME			T datea):		EACHITY				6. NAME AN	ID TITLE OF	PERSON AUTHOR	ZED TO S	IGN OFFER			
AND CODE ADDRESS			FACILITY				(Type or print)									
OF OF	ŒSS															
OFFE	ROR															
		ŀ														
							J		***************************************							
AREA CODE	T	5B. TELEPHONE NU IUMBER	MBER EXT.		ECK IF REMITTANCE AD			ľ	7. SIGNATU	IRE				18. OFFER	DATE	
			EX	IS DIFFERENT FROM ABOVE - ENTER SUCH ADDRESS IN SCHEDULE.												
·	L.					(To be com	pleted b	v gover	nment)							
19. ACCEPT	ED AS	TO ITEMS NUMBER	ED	20. AMO		·			G AND APPE	ROPRIATION	V					
22. AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION:								DICES TO AE		IOWN IN		ITEM				
10 U.S.C. 2304 (c) ( ) 41 U.S.C. 253 (c) ( )					)	(7 00	, rou aim	Outor wise	. spoulieu)							
24. ADMINISTERED BY (If other than Item 7) CODE						25. PAY	MENT W	ILL BE MADE	E BY		CODE					
26 NAME 0	E COM	TRACTING OFFICER	(Type or no-t)				07.10		<b>T</b>	-0.0.1			***************************************			
LU. NAME ()	i- CON	TOACTING OFFICER	v ( rype or print)				Zr. UNIT	ED STA	TES OF AME	ERICA				28. AWARD	DATE	
Valar-	ı	T Chi														
Volanda J. Chinn						(Signature of Contracting Officer)										

CONTINUATION CUEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE C	OF	
CONTINUATION SHEET	DTOS59-09-R-00002	2	2	

NAME OF OFFEROR OR CONTRACTOR

TEM NO.	SUPPLIES/SERVICES	QUANTITY	иит	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
*	Tax ID Number: Not Available				
	DUNS Number: Not Available				
	See Attached documents for full Solicitation DTG	)S59-09-R	1000	02-1 posted	on Fedbizops.
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